

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Woodrow Terry

1. Office, Agency, or Court

Agency Name

Alpine County

Division, Board, Department, District, if applicable

Board of Supervisors

Your Position

District 4 Supervisor

► If filing for multiple positions, list below or on an attachment.

Agency: See attachment

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☒ County of Alpine

☐ City of

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2011, through December 31, 2011.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election Year ____ Office sought, if different than Part 1: ____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 5

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is a
I certify under penalty of perjury under the laws of the State of California that

Date Signed

2/21/2012
(month, day, year)

Signature

EXPANDED STATEMENT

STATEMENT OF ECONOMIC INTERESTS FORM 700
2011/2012

TERRY WOODROW

ALPINE COUNTY SUPERVISOR
DISTRICT 4

Central Sierra Child Support Agency Board of Directors
Board Member

-Central Sierra Economic Development District Governing Board
Board Member (Alpine, Amador, Calaveras, Tuolumne)
-Central Sierra Planning Council
Board Member

-Central Sierra Resource Conservation and Development Board
(Amador, Alpine, Calaveras)

Children and Families (First 5) Commission

Local Agency Formation Commission (LAFCO)
Commissioner

Mountain Valley EMS Agency
Board Member

Upper Mokelumne River Watershed Authority (Amador, Alpine, Calaveras)
Board Member (Representing Board of Supervisors and Water Agency)

FPPC

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name Terry Woodrow

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

NAME OF LENDER*

ADDRESS (*Business Address Acceptable*)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

FPPC Form 700 (2011/2012) Sch. C
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name <u>Terry Woodrow</u> |

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Creekside Condo Association #1

ADDRESS (Business Address Acceptable)

PO Box 5127, Bear Valley CA 95223

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Home Owner's Association

YOUR BUSINESS POSITION

Manager

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Creekside Condo Association #2B

ADDRESS (Business Address Acceptable)

PO Box 5314, Bear Valley CA 95223

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Home Owner's Association

YOUR BUSINESS POSITION

Manager

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____ % ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name Terry Woodrow |

- You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

| | |
|--|-------------------------------------|
| ▶ NAME OF SOURCE Regional Council of Rural Counties | |
| ADDRESS (Business Address Acceptable) 1215 K Street, Suite 1650 | |
| CITY AND STATE Sacramento CA 95814 | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | <input type="checkbox"/> 501 (c)(3) |
| Advocacy for rural counties | |
| DATE(S): ____/____/____ - ____/____/____ (If gift) | AMT: \$ 88.65 |
| TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input checked="" type="checkbox"/> Income | |
| <input type="checkbox"/> Made a Speech/Participated in a Panel | |
| <input checked="" type="checkbox"/> Other - Provide Description | |
| Meals, expense reimbursements and expenses paid by RCRC | |

| | |
|--|-------------------------------------|
| ▶ NAME OF SOURCE California State Association of Counties | |
| ADDRESS (Business Address Acceptable) 1100 K Street, Suite 101 | |
| CITY AND STATE Sacramento CA 95814 | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | <input type="checkbox"/> 501 (c)(3) |
| Advocacy for counties | |
| DATE(S): ____/____/____ - ____/____/____ (If gift) | AMT: \$ 1014.28 |
| TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input checked="" type="checkbox"/> Income | |
| <input type="checkbox"/> Made a Speech/Participated in a Panel | |
| <input checked="" type="checkbox"/> Other - Provide Description | |
| Meals, expense reimbursements and expenses paid by CSAC | |

| | |
|--|-------------------------------------|
| ▶ NAME OF SOURCE California State Association of Counties | |
| ADDRESS (Business Address Acceptable) 1100 K Street, Suite 101 | |
| CITY AND STATE Sacramento CA 95814 | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | <input type="checkbox"/> 501 (c)(3) |
| Advocacy for counties | |
| DATE(S): 01/01/11 - 12/31/11 (If gift) | AMT: \$ 79.95 |
| TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income | |
| <input type="checkbox"/> Made a Speech/Participated in a Panel | |
| <input type="checkbox"/> Other - Provide Description | |

| | |
|---|-------------------------------------|
| ▶ NAME OF SOURCE | |
| ADDRESS (Business Address Acceptable) | |
| CITY AND STATE | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | <input type="checkbox"/> 501 (c)(3) |
| DATE(S): ____/____/____ - ____/____/____ (If gift) | |
| AMT: \$ | |
| TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income | |
| <input type="checkbox"/> Made a Speech/Participated in a Panel | |
| <input type="checkbox"/> Other - Provide Description | |

Comments: _____